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ISBN: 0-8186-7417-2

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Abstract:

The protection of personal health information has become a live issue in many countries, including the USA, Canada, Britain and Germany. The debate has been there is widespread confusion about what should be protected, and why. Definitions of military and banking systems can refer to Bell & LaPadula (1973) and Clark & Wilson (1987) respectively, but there is no comparable security policy model that is suitable for clinical information systems. In this article, we propose such a model. It was commissioned by doctors and is driven by medical ethics informed by the actual threats to privacy, and reflects current best clinical practice. The effect is to restrict both the number of users who can access any record and the number of records accessed by any user. This entails controlling information flow rather than down and enforcing a strong notification property. We discuss it with existing security policy models, and its possible use in other applications where information exposure must be localised; these range from private banking to management of intelligence data.

Index Terms:

medical information systems; security of data; data **privacy**; DP management; policy model; clinical information systems; personal health information protection; **medical ethics**; **privacy** threats; restricted user numbers; restricted record numbers; information flow control; strong notification property enforcement; localized information exposure; private banking; intelligence data management

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